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**REVOCATION OF POWER OF
ATTORNEY WITH
NEW POWER OF ATTORNEY
AND
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	10/567,632
Filing Date	August 16, 2006
First Named Inventor	MEINHOLD, Matthias
Art Unit	3773
Examiner Name	ANDERSON, Gregory A.
Attorney Docket Number	Tegel & Meyer

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number:

24108

☒ Please change the correspondence address for the above-identified application to:

☒ The address associated with
Customer Number:

24108

OR

☐ Firm or
Individual Name

Address

City

State

Zip

Country

Telephone

Email

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature

Name

KUFFNER, Hermann

Date

12.02.2008

Telephone

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ *Total of Two (2) forms are submitted.

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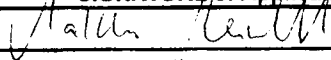
<input type="checkbox"/> Firm or Individual Name					
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SIGNATURE of Applicant or Assignee of Record

Signature			
Name	MEINHOLD, Matthias		
Date	2008 Feb. 12th	Telephone	0049911583253

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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